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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/874,465	06/04/2001	James C. Butts	78757	5370

7590 10/15/2004

Naval Undersea Warfare Center
Division Newport
Office Of Counsel, Bldg 112T
1176 Howell Street
Newport, RI 02841-1708

EXAMINER

CARONE, MICHAEL J

ART UNIT	PAPER NUMBER
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3641

DATE MAILED: 10/15/2004

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Please find below and/or attached an Office communication concerning this application or proceeding.



APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.
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EXAMINER

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DATE MAILED:

NOTICE OF ALLOWABILITY (FORM D-10)

This application is now in a condition for allowance, and the prosecution is closed.

However, in view of the Secrecy Order filed on March 25, 2003 under 35 USC (1952) § 181, this application will be withheld from issue during such period as the national interest requires.

1. ☒ This communication is responsive to the secrecy order of 3/25/03.
2. ☒ The allowed claim(s) is/are 1-8.
3. ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d).
 - a) ☐ All b) ☐ Some* c) ☐ None of the CERTIFIED copies of the priority documents have been
 1. ☐ received.
 2. ☐ received in Application No. (Series Code / Serial Number). _____.
- * Certified copies not received: _____.
4. ☐ Acknowledgement is made of a claim for domestic priority under 35 U.S.C. § 119(e).
5. ☐ The proposed drawing correction filed on _____ is: a) ☐ approved b) ☐ disapproved.

Attachment(s)

- | | |
|--|--|
| 1 <input type="checkbox"/> Notice of References Cited (PTO-892) | 5 <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| 2 <input type="checkbox"/> Notice of Draftperson's Patent Drawing Review (PTO-948) | 6 <input type="checkbox"/> Interview Summary (PTO-413), Paper No. _____ |
| 3 <input type="checkbox"/> Information Disclosure Statements (PTO-1449), Paper No. _____ | 7 <input type="checkbox"/> Examiner's Amendment/Comment |
| 4 <input type="checkbox"/> Examiner's Comment Regarding Requirement for Deposit of Biological Material | 8 <input type="checkbox"/> Examiner's Statement of Reasons for Allowance |
| | 9 <input type="checkbox"/> Other |

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